

Fayetteville Police Department CITIZEN RIDE-ALONG REQUEST



Dear Sir:
I would like to ride along on/ accompanying Officer
for the following reason:
I have read and signed the release form and I understand the provisions and liabilities.
Name:
Date of Birth:
Address:
Telephone:
Best time to call:
Sincerely,
(Signature) Date:
(Organical C)
(Please Print Name)



Fayetteville Police Department CITIZEN RIDE-ALONG REQUEST



RELEASE AND WAIVER

KNOW ALL MEN BY THESE PRESENT, that I
on behalf of my heirs, next of kin, executors, administrators, estate, agents and assigns, and
representatives of any nature whatsoever, for and in consideration of the authorization and
permission to accompany officers or any officer of the Fayetteville Police Department during the
course of their or his /her duties, which has been granted to me at my voluntary request, after
having been fully advised of the potential hazards of such activity or activities, do hereby
WAIVE AND RELEASE all demands, damages, actions, causes of action, suits and claims of
any nature whatsoever, whether in law or in equity, that I or my heirs, next of kin, executors,
administrators, estate, agents and assigns, and representatives of any nature whatsoever might
otherwise have against the City of Fayetteville, the Fayetteville Police Department, and each and
every officer, official, member, employee, agent and attorney thereof and therefore, and his or
her heirs, next of kin, executors, administrators, and estate, on account of my death or injuries,
both to person and to property, whether foreseeable or not, which may occur, directly or
indirectly, or develop at anytime in the future as a result of my activities or association with the
Fayetteville Police Department, whether in a police vehicle, in the police station, or otherwise in
association with the police department and officers and officials thereof in any manner
whatsoever. It is expressly agreed and understood that this WAIVER AND RELEASE shall
apply for the express purpose of precluding forever all claims, suits, demands, damages, and
causes of action that I or my heirs, next of kin, executors, administrators, estate, agents and
assigns and representatives of any nature whatsoever might otherwise assert against any of the
aforesaid parties as a result of my association and activities with the Fayetteville Police
Department during:

(Dates of authorized participation)

I hereby declare that the terms of this WAIVER AND RELEASE have been fully read and

understood by me, and freely and voluntarily entered into and accepted by me, and I hereby

acknowledge receipt of a copy of this agreement.

In further consideration of the aforesaid authorization and permission granted to me to

accompany an officer or officers of the Fayetteville Police Department at my own request, I

hereby promise and agree to fully comply with all instructions given to me for the purpose of

protecting my personal safety and that of my property.

(Signature of Observer)		

Scott Gray, Chief of Police or Designee

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Fayetteville Police Department CITIZEN RIDE-ALONG



OBSERVER COMMENT FORM

		NAM	E:			
		ADDI	RESS:			
		CITY	, STATE, ZIP:			
		TELE	PHONE NUMBER:			
YES	NO	DATE	3:			
		1.	Was the experience of police work what you expected?			
		☐ 2. Did you expect more from the experience?				
		3.	Was your experience educational?			
	☐ 4. Did the host officer adequately explain the aspects of his/her job to yo					
	☐ 5. Was the host officer knowledgeable of the subject material?					
	☐ ☐ 6. Did the host officer conduct him/her self in a professional manner?					
		7.	7. Was the host officer polite and courteous?			
		8.	If force was used, was it excessive?			
		9.	Would you have performed the job differently? (If so, what? And why?)			
Expla	ain:					
of the	e Fayette	ville Po	or Suggestions on the experience of the Ride-Along program or other aspect plice Department, or the operational			



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OFFICER COMMENT FORM

		OFF	ICER NAME:		
		DAT	TE:		
YES	NO				
		1.	Was the observer knowledgeable of police work?		
		2.	Did the observer expect more from the experience?		
		3.	Do you believe the observer enjoyed the experience?		
		4.	Did the observer understand the aspects of your job?		
		5.	5. Was the experience of having an observer educational?		
		6.	Did the observer conduct him/her self in a professional manner?		
		7.	Was the observer polite and courteous?		
		8.	Was force used in any respect during the shift with the observer?		
		9.	Would you have performed the job differently without an observer? (If so, what? and why?)		
Expla	ain:				
			or Suggestions on the experience of the Ride-Along program or other aspects Police Department, or the operational procedures.		

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CONSENT FORM

I hereby authorize any Agent of the City of Fayetteville Police Department to receive any Criminal History Record and Driver/Motor Vehicle History information pertaining to me which may be in the files of any Federal, State, or Local Criminal Justice Agency. Additionally, I have provided a copy of my Drivers License and completed the information below to assist the Fayetteville Police Department in obtaining this information.

Printed Full Name (Last, First, Middle)				
Address (Street Number)	City,	State	Zip	
(222000)	2,,	2-11-2	—г	
	☐ Male	☐ Female		
Date of Birth	Sex		Race	
Social Security Number	-	Drivers License	e Number	
	_			
Signature		Date		

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